

2005 White House Conference on Aging Recommendations

Developed from: *VETERANS IN OUR COMMUNITIES*
A White House Conference on Aging:
Independent Aging Agenda Event

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Priority Issue One: Identify veterans in all healthcare settings to facilitate their care and honor them for their service

Of all Americans over age 65, one-fourth are veterans. Ensuring that these veterans receive appropriate health care is one form of recognizing and appreciating their service to our nation. Honoring veterans in life and memorializing them in death is an American tradition and commitment. Ensuring that veterans are identified and given the opportunity to use the health care services for which they are eligible is part of this commitment.

Barriers:

- Veterans utilize doctors, hospitals, nursing homes, and other health care delivery systems throughout the nation. These public and private providers are often unaware that they are serving a veteran of the United States military.
- Veterans do not always realize the relevance of their military service to the care they seek. They may be unaware of eligibility for health care services offered by the Department of Veterans Affairs (VA). Veterans do not always inform health care providers of their veteran status.
- Health care professionals do not always inquire about military service and may not facilitate access to VA benefits and programs.
- Health care records which identify the veteran as such are not always readily available to health care providers.

Proposed Solutions:

- Implement a system for health care providers in all settings to routinely inquire about each patient's military service, to ensure recognition for the veteran's service and to facilitate access to VA benefits. This will strengthen our commitment to respectfully recognize the contributions that veterans have made to our nation.
- Require that every medical record and insurance form include questions regarding a patient's military service. A standardized set of questions about veteran's status should be developed for doctors, hospitals, nursing homes, and other healthcare delivery systems.
- Widely disseminate assessment and communication tools with background information and instruction on how to coordinate care with VA programs for identified veterans.

Priority Issue Two: Ensure access to vital health information across all care settings through the use of Electronic Medical Records

The growing awareness of serious quality of care problems in the health care system demands that the available technology of electronic medical records be used to improve care for our nation's veterans. The use of electronic medical records would address the myriad of problems currently found throughout the health care system including: unnecessary or redundant lab tests, drug errors, physician orders not being executed as written, unnecessary hospital admissions, and poor care coordination.

Barriers:

- Veterans are examined and treated in all care settings (e.g. outpatient clinics, hospitals, nursing homes, and in Department of Veterans Affairs, Department of Defense, Indian Health Service and private care facilities) in locations across the country and in other parts of the world. This creates challenges in ensuring that when a veteran is treated that his or her medical records are available to the health care professionals and that the diagnosis and treatments are properly recorded.
- Veterans, like most Americans, are concerned that the health care system protect the confidentiality of their medical records. Any system that ensures that health care providers have timely access to records must also ensure veterans' records remain confidential and available only to those authorized to access them.
- The use of new technologies by health care professionals and health care users (veterans) is often delayed as a result of a lack of resources, including personnel,

training tools, and funding. Further, a lack of understanding and acceptance of new technologies may lead to implementation barriers.

- The care settings in which veterans are served and the health care professionals who serve them all have their own administrative structures, knowledge bases, and health care goals, thereby creating a challenge for the standardized and consistent use of new technologies.

Proposed Solutions:

- Develop a mechanism whereby all vital health care information for veterans can be immediately accessed through an electronic medical record by providers across all health care sectors and locations, in VA and non-VA systems.
- Provide the necessary resources to ensure that the electronic medical records are accessible across all care settings and geographic locations for both the veteran and the authorized health care personnel.
- Empower the veteran and his or her caregivers to participate in the care and management of his or her wellness, through education in how to use electronic medical records and how to take advantage of patient-centered care.
- Ensure that veterans, providers, and the public understand the value and use of electronic medical records and ensure that each patient's confidentiality is appropriately protected.
- Request the Government Accountability Office (GAO) to conduct a study of the potential for improving quality of care and saving resources by using electronic medical records for all veterans.

Priority Issue Three: Facilitate the use of community-based care for veterans

At the 1995 White House Conference on Aging, the delegates strongly supported resolutions aimed at ensuring that older Americans have the choice to use community based care (e.g. home care, adult day care, respite care, hospice care) as an alternative to institutional long-term care. Most veterans, along with most older Americans and individuals with disabilities, would prefer to remain in their homes and communities as long as practicable. Home and community-based care programs can help to make this possible and improve the quality of life for veterans who need care and services for their chronic illnesses and disabilities.

Barriers:

- The current health care system reflects a bias toward institutional-based care.

- Federal and state funding of community-based care has not kept pace with the growth in the older population and the demand for services. Some federal and state programs have been cut or eliminated.
- Informal caregiving, which family members provide to veterans with chronic illnesses, often creates both financial hardship and emotional stress on the families.
- Many communities lack the trained professionals needed to provide home and community-based care to their increasing population with long-term care needs.
- Persons in greatest need of services may not be able to advocate for themselves.

Proposed Solutions:

- Develop and implement a national campaign to increase public awareness of home and community-based services, how to access these programs, and the important role played by family and volunteer caregivers.
- Work to ensure that adequate support is provided by VA and non-VA systems to ensure access to community-based care. This should include a national needs assessment of veterans and caregivers (from the veterans' and caregivers' perspective), a national plan of action to provide needed home and community-based care, and sharing of best practices and model programs nationwide.
- Create a system of in-home respite care services using volunteers to help caregivers maintain veterans in their homes as long as possible.
- Focus efforts on and create advocacy assistance for veterans with mental and/or physical disabilities, who are at risk of becoming institutionalized.
- Ensure that all veterans have access to the least restrictive environment in their communities.

Priority Issue Four: Link veterans with appropriate and rewarding volunteer opportunities

The United States faces the potential for labor shortages, the need for emergency preparedness, and the need to increase intergenerational understanding and preservation of our culture and history. Veterans of all ages could help with these challenges through valuable volunteer service to their communities. Veterans are often well respected, educated and skilled members of society and could serve in numerous fields, including education, health care, and homeland security. Further, veterans often respond to threats of terrorism with a proactive attitude and a willingness to help. Many

older veterans would like to continue to work full-time or part-time, paid or unpaid. Veterans need to be connected with appropriate volunteer opportunities, yet this does not always happen.

Barriers:

- Negative attitudes exist toward older individuals and/or veterans.
- Employers often do not provide flexible work schedules to accommodate older workers' interest in less than full-time employment and more time for volunteerism.
- Communities rarely assess their own needs and the interests of their potential volunteers, including its veterans.
- Communities often lack the resources to connect able volunteers with appropriate volunteer opportunities.

Proposed Solutions:

- Create new models for the future to provide the necessary funding, recruitment, retention, training and coordination for veterans in volunteer programs.
- Create a survey to assess veterans' inventory of skills, talents, and volunteer desires. Develop methods to share this information with communities that need volunteers.
- Conduct demonstrations to help younger (baby-boom) veterans to transition from service or work into volunteer roles.
- Assess how current federal civic service programs, such as AmeriCorps, Senior Corps, USA Freedom Corps, Peace Corps, and SCORE, are engaging veterans in volunteer activities.
- Encourage businesses and the nonprofit sector to work to create volunteer and paid work opportunities for veterans.